

8585 Archives Ave., Ste. 310 Baton Rouge, LA 70809

October 8, 2021

VIA CERTIFIED MAIL (return receipt requested) AND VIA E-MAIL

Mr. Michael Boutte
Medicaid Deputy Director – Program Operations and Compliance Division
Louisiana Department of Health
628 North 4th Street
Baton Rouge, Louisiana 70821
Email: Michael.Boutte@la.gov

Re: Appeal of September 29, 2021 Notice of Monetary Penalty – Updating of Provider Directories

Dear Mr. Boutte:

Pursuant to Section 22.0 of the LDH-LHCC January 1, 2020 Contract ("Contract"), Amendment 3, please accept this letter as Louisiana Healthcare Connections, Inc.'s ("LHCC") appeal of the September 29, 2021 Notice of Monetary Penalty – Updating of Provider Directories issued by the Louisiana Department of Health ("LDH"). LDH imposes a \$50,000.00 penalty resulting from LHCC's alleged failure to increase the accuracy of its provider directory information by two percentage points from the prior period. A copy of LDH's September 29, 2021 Notice of Monetary Penalty correspondence ("NOMP") is enclosed for your convenience and marked as Exhibit A.

LDH notes in the NOMP that our 2021 Quarter 1 results reveal a compliance score of 57.1% and a 58.9% compliance score for 2021 Quarter 2. The 2021 Q2 score was determined by using a Complaint score of 62 and a Noncompliant score of 63. Thus, since the audit results did not indicate an accuracy score increase of 2% or more when comparing 2021 Q1 to 2021 Q2, LDH levied the above mentioned penalty.

A. Survey Results

Upon investigation of the survey results attached to the NOMP, we have discovered at least one (1) instance where the survey findings are not accurate. Once this inaccuracy is corrected and taken into account in calculating the compliance score, we believe LHCC did in fact improve its compliance score by the requisite 2%. As a result, the imposition of the monetary penalty should be rescinded.

According to the NOMP, we are required to correct or confirm survey inaccuracies by October 20, 2021. We respectfully request the opportunity to supplement this appeal upon completion of our investigation to the extent additional inaccuracies are discovered but in no event later than October 20, 2021.

Specifically, Survey ID number 399 is not correct. The IPRO findings as summarized in the survey are as follows:

Survey ID	ProviderPhoneN	Provider Name	NPI	TIN	TIN Provider Name
399	(504) 894-2887	Gregory, Larsen	1548497860	72-0276883	Ochsner Clinic LLC NO

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In this this instance, IPRO finds that the referenced provider was not in LHCC's network. Since LHCC had listed the provider as an in-network provider in its provider directory during the relevant audit period, LHCC was assessed a Noncompliant score. As will be shown below, Dr. Larsen and Ochsner Clinic, LLC were in-network during the 2021 Q2 and LHCC should have been given credit for the accuracy of its information as it relates to Survey ID 399.

B. Provider Agreement.

As demonstrated here, the provider listed above is in our provider network and was in our provider network at the time the survey was conducted during 2021 Q2. Attached is the agreement with referenced provider:

(i) <u>Group Agreement</u> with Ochsner Clinic, LLC ("Ochsner") dated December 1, 2015. This agreement applies to Dr. Karen Fisher and Dr. Larsen. Please see Exhibit B.

This agreement has remained in place since its execution and was in place during the audit period.

C. Provider Written Attestation.

In addition, I have enclosed the written attestation of Ochsner confirming the existence of the Group Agreement, Dr. Larsen as a provider pursuant to that agreement and that both were in-network during 2021 Q2. The attestation further confirms that the survey results identified in Survey ID 399 are not correct. <u>Please</u> see Exhibit C

D. Provider Billings During 2021 Quarter 2 Period.

Finally, I have attached certain claims data information that shows Dr. Larson providing services to our members during the relevant survey period.

As the evidence clearly demonstrates, we should receive a "Compliant" score instead of a "Noncompliant" score for this provider. This change directly impacts the calculation our provider director accuracy percentage increase.

E. Assessment of Monetary Penalties.

In this case, LDH has relied on the provisions of Section 20.3.3 in its assessment of the monetary penalty. The basis of the decision is that we allegedly failed to meet the "minimum accuracy rate of 50% in conjunction with a two percentage point improvement from the prior period". As noted by LDH in its NOMP, the IPRO audit findings clearly establish that LHCC's compliance score exceeded the 50% accuracy rate threshold – with a 58.9% score. However, the results of the IPRO survey finds an improvement score quarter-over-quarter of 1.8% (58.9% - 57.1%). Thus, LDH issued the maximum penalty solely on the basis of not meeting the 2% improvement threshold.

D. Request to Recalculate the Compliance Score.

Based upon the information provided to you, we respectfully request that LDH recalculate our compliance score based upon a Compliant score of 63 and a Noncompliant score of 62. This request is justified upon the basis that the provider identified above was in fact in-network during the survey period and that our network directory accurately and correctly listed it as so.

We believe the results of the calculation will confirm that LHCC has surpassed both the (i) minimum 50% accuracy rate and (ii) the two percentage point improvement score compared to the prior audit period. If these two metrics are achieved, the monetary penalty assessed should be rescinded.

Alternatively, under the worst case scenario, we missed the 2% threshold by 0.2%. The issuance of the maximum penalty amount does not recognize the efforts extended by LHCC in improving its accuracy rate by 1.8% during Q2 and should be reduced. We are committed to improving the accuracy of our directory on an ongoing basis. We realize that should you recalculate our score in response to this appeal, the bar will be set higher for LHCC in future quarterly evaluations.

We appreciate your consideration of our appeal and look forward to hearing from you. Should you have any questions, please do not hesitate to contact me.

Verv truly vours

Marshall Ellis

Vice President, Operations

Attachments
CC via e-mail (with attachments):
Jamie Schlottman
Joe Sullivan